# City of Northampton Application for Annual License

NORTHAMPTON, MASS., MAY 0 5 2022

To the Honorable City Council of the Ci	ty of Northampton
	s your honorable body for a License as follows:
Name of Business:	Packards
Type of License:	Pool Tables-Sunday
Location of Business:	14 Masonic Street
Print Name of Applica	nt: (V) ROBERT E. Mc GOUERN JR.
Signature of Applicant	(V) fant hoping
Address of Applicant:	(V) No. 53 Street MAIN S7  City, State, Zipcode ATFIELD, MA 01038
	City, State, Zipcode HATFIELD, MA 01038
	In Committee on Licenses,
In City Council,	Voted to recommend that Petitionbe
Referred to Committee on Licenses.	granted, not granted
ATTEST:	ATTEST:
City Clerk	Clerk
In City Council,	Voted that Petition be granted not granted

\_\_Clerk to City Council

Attest: \_\_

# Application for Annual License

NORTHAMPTON, MASS., \_

MAY 05 2022

To the Honora	ble City Council of the Ci	ity of Northam	pton:
The undersign	ed respectfully petition	ıs your honora	ble body for a License as follows:
	Name of Business:	<u>Packards</u>	
	Type of License:	Pool Tables-	<u>Weekdays</u>
	Location of Business:	14 Masonic S	<u>Street</u>
	Print Name of Applica	nt: ( <b>V</b> )_Rob	ERT E. Mc GOUERN JR.
	Signature of Applicant	: (V) Jen	E The fund
	Address of Applicant:	(V) No. (S	Street MAIN ST  te, Zipcode HATFIELD MA CHO38
		City, Stat	te, Zipcode HATFIELD MA C1038
In City Council			In Committee on Licenses,
	mmittee on Licenses.		Voted to recommend that Petitionbe granted, not granted
ATTEST:			ATTEST:
	City Clerk		Clerk
In City Council,		(date)	Voted that Petition be granted
			not granted
Attact.		Claritata	City Council

#### STATEMENT OF ALL TAXES FILED AND PAID

Name of Business:

**Packards** 

**Location of Business:** 

14 Masonic Street

The licenses to operate as a second hand dealer will not be issued unless this certification clause is signed by the applicant listed on the license.

I, (V) ROBERT E. Mc GOVERN (print name of owner or authorized agent of the business) certify under the penalties of perjury that I, to my best knowledge and belief, have field all state tax returns and paid all state taxes as required under law.

Signature of Owner or Agent

Social Security Number

(V

Federal Identification Number

Your social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licenses who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Massachusetts General Law, chapter 62C, section 49A.

or (V

#### AFFADAVIT OF WAGE COMPLIANCE

Name of Business:

**Packards** 

**Location of Business:** 

14 Masonic Street

The Northampton City Council, in determining whether to issue, re-issue, modify, suspend or revoke a license. under G.L. c. 140, shall require that a potential or current licensee certify that they are not subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act The City Council may require a wage bond or insurance be posted by any potential licensee who does not certify that they are not subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act. Licensees that are subject to a state or federal debarment for violation of the above laws, either voluntarily or involuntarily, or that have been prohibited from contracting with the Commonwealth or any of its agencies or subdivisions shall be prohibited from holding, or continuing to hold, licenses issued under G.L. c. 140, for the entire period of debarment or other stated time period.

Applicants must check box 1 or box 2 as applicable and must sign this Form, certifying compliance with the requirements set out in this Form. This Form must be included with the application.

AFFAD	AVIT:	(V) (Choose 1 below)
V	administr	nse applicant is not subject to a federal or state criminal or civil judgment, rative citation, order or final administrative determination resulting from a violation of 9, c. 151, or the Fair Labor Standards Act within the last three years.
	citation, of the	nse applicant is subject to a federal or state criminal or civil judgment, administrative order or final administrative determination resulting from a violation of G.L. c. 149, c. ne Fair Labor Standards Act within the last three years. This applicant will provide a nd or wage insurance for the period of the license.
		$\mathcal{I}\mathcal{I}\mathcal{G}\mathcal{I}\mathcal{I}\mathcal{O}$

(V) KOBRRT E. Mc GOURRN JR
(Typed or printed name of applicant)

Signature)

## Treasurer/Collector's Office Permit Denial Form

Revised 11-30-2018

REQUESTED BY: Pamela L. Powers, City Clerk

Name of Person, Corporation or Business: Packa	rds	
Location of Property, Service or Address: 14 Mason	nic Street, Nor	thampton, MA 01060
		Assessment of the second
All permits denied for outstanding amounts must from the Treasurer/Collector's Office PRIOR to i	receive confir	mation of good standing permit.
For Tax Collector's/Treasur	er's Office Use	Only
Please list below any tax, assessed to your office the more after its due date, <u>unless</u> there is a pending a Tax Board, for the person, corporation, or business.	batement or a ss entity noted	ppeal before the Appellate above.
No confirmable outstanding obligation 12+ mo	nths beyond o	due date.
		The state of the s
Signed: Water & Ptol	Dated:	4/14/2022
Adopted 5-21 1992 [Ch14 S.14-21 of the 1977 Code] Denial/Revocation of License		City of Northampton
		The second second